

Los Angeles County Treasurer and Tax Collector

Application for Business License



Please note: Business License fees are NOT refundable

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10# 149710

	BUSINESS INFORMATION			
Type of Business:	Address of Business: 18354	2 Soledad CYN RD		
Massage Poxlor Gene	Business Telephone: Santa (Clarita, Ca. 91387 52-9991		
DBA (Business Name):	Mailing Address: 18354 6	Soledaid CYN RD		
Massage Porlor Gene DBA (Business Name): LANNA THAI SPA	Santa C	larita G. 91387		
Sellers Permit # (State Board of Equalizatio				
Business Ownership Structure: If LLC or Corporation, the information below	Single Owner Partnership \(\) LLC _ w is required:	Corporation		
Date of Incorporation:	Incorporated in the State of:	······································		
Exact Corporate Name:				
Names of Officers	Addresses	Titles		
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APPLICANT INFORMATION				
Applicant's Full Name: REWAT RASSAMEKIARTTISAK.				
Home Address:	/ / /			
Home Telephone: Cell	Phone: Email add	ress:		
		NA		
Social Security #: Date	e of Birth: Place of Bi	irth:		
Driver's License or State ID#:	- Contradical			
Driver's License or State 10#:	Expiration I	Date		
Male Female Height	Weight Hair Color	Eye Color		
The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the license applied for, I agree to submit any additional information that may be required, to conduct all phases of this business				
license in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be				
used in connection therewith in conformance with all applicable laws, ordinances and regulations.				
Date: 09-2/-/S Applicant's Signature:				
Application taken by:		Date: 9-21-15		

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

amay 1/15

KIND OF BUSINESS: MASSAGE PARLOR-GENERAL/SC

ADDRESS OF BUSINESS: 18354 1/2 SOLEDAD CYN RD, SANTA CLARITA, CA 91387

TELEPHONE: (661) 252-9991

OWNER OF BUSINESS: REWAT RASSAMEKIARTTI

CAL. DR. LIC.#



NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: LANNA THAI SPA

MAILING ADDRESS: 18354 1/2 SOLEDAD CYN RD, SANTA CLARITA, CA 91387

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

BUILDING & SAFETY SANTA CLARITA

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RECOMMENDATION:	We	Nec	omme	end	approu	20
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SIGNATURE:	Ham	uch		DATE:	9/22/15	

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COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

107

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DATE THAT YOU STARTED BUSINESS:

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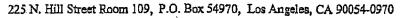
THIS IS AN APPLICATION FOR:NEW LICENSE

FIRE DEPARTMENT LA COUNTY

DENIAL
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DATI2: 10/4/18
B 09/12/15 IDENTIFICATION NUMBER 14271



COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR





BUSINESS LICENSE APPLICATION REFERRAL

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TELEPHONE: (661) 252-9991	
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CAL. DR. LIC#:	•
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THIS IS AN APPLICATION FOR: NEW LICENSE	
PUBLIC HEALTH	
LA COUNTY	
APPROVAL	☐ DENIAL
RECOMMENDATION:	
1	
SIGNATURE: J. Martine D.	ATE: 3/10/2016

BASICLICENSE NO. 8430

DATE 02/24/16

IDENTIFICATION NUMBER 142710









KIND OF BUSINESS: MASSAGE PARLOR-GENERAL/SC

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SHERIFF FINGERPRINT LA COUNTY

	APPR	COVAL		DENIAL
RECOMMENDATION:	Λ Λ .			maninga dan dan kantan Pranja dan maningan maningan sa 2000 kan pratis managan bahda dan dan dan dan dan dan d
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SIGNATURE:	M/)_	536470	DATE:	211055
BASIC LICENSE NO. 843	0	DATE 09/22/15	C (n 7	IDENTIFICATION NUMBER 142710

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ZONING REFERRAL

TO:	CITY OF SANTA CLARITA	
	COMMUNITY DEVELOPMENT/PLANNING	1110
	23920 VALENCIA BLVD., STE # 140	AUG 1 8 2015
	SANTA CLARITA, CA 91355	The state of the s
	ONITITY OF STATE OF S	PLANNING APPROVAL AS MARKED
		SUBJECT TO ALL APPLICABLE SECTIONS
FROM:	TREASURER TAX COLLECTOR	OF THE UNIFIED DEVELOPMENT CODE
	BUSINESS LICENSE SECTION	CITY OF SANTA CLARITA
	23757 VALENCIA BLVD	COMMUNITY DEVELOPMENT
	SANTA CLARITA CA 91355	
	O/11171 OE 11171 O/1 0 1000	
		PLANNING DIVI SION
DATE:	8/17/2015	Therefore the same and the same
		OTC 15-1735
TYPE OF	F BUSINESS(ES) MASSAGE PARLOR	
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ADDRES	SS OF BUSINESS 1835A 2 Sole And	CHN KI)
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CITY	Santa Clarita	ZIP CODE // 38 /
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NAME O	FOWNER Areeway Sanacawaya	and Manter
	2019300.301	
"DBA"	LANNA THAT SOA	TEL. #: (661) 252-9991
RAAII INIC	SADDRESS 1835AZ Soledad C	YN RO
MAILING	BADDRESS 1835AZ SOLEANA C	
	01011	21204
	Canta Clarita, a.	91387
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	SIGNATURE OF ZONING OFFICER	DATE